



Secretary of State
Statement of Information
 (California Nonprofit, Credit Union and
 General Cooperative Corporations)

SI-100

FILED
Secretary of State
State of California

MAY 06 2019

IMPORTANT — Read instructions **before completing this form.**

Filing Fee — \$20.00;

Copy Fees — First page \$1.00; each attachment page \$0.50;
 Certification Fee — \$5.00 plus copy fees

1. Corporation Name (Enter the exact name of the corporation as it is recorded with the California Secretary of State)

Common Sense Media

NF
 This Space For Office Use Only

2. 7-Digit Secretary of State File Number

C2373350

3. Business Addresses

a. Street Address of California Principal Office, if any - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
650 Townsend Street, Suite 435	San Francisco	CA	94103
b. Mailing Address of Corporation, if different than item 3a	City (no abbreviations)	State	Zip Code
N/A			

4. Officers

The Corporation is required to enter the names and addresses of all three of the officers set forth below. An additional title for Chief Executive Officer or Chief Financial Officer may be added, however, the preprinted titles on this form must not be altered.

a. Chief Executive Officer/	First Name	Middle Name	Last Name	Suffix
James		P.	Steyer	
Address			City (no abbreviations)	State Zip Code
650 Townsend Street, Suite 435			San Francisco	CA 94103
b. Secretary	First Name	Middle Name	Last Name	Suffix
Valrie			Sanders	
Address			City (no abbreviations)	State Zip Code
650 Townsend Street, Suite 435			San Francisco	CA 94103
c. Chief Financial Officer/	First Name	Middle Name	Last Name	Suffix
David		E.	Kuizenga	
Address			City (no abbreviations)	State Zip Code
650 Townsend Street, Suite 435			San Francisco	CA 94103

5. Service of Process (Must provide either Individual OR Corporation.)

INDIVIDUAL — Complete items 5a and 5b only. Must include agent's full name and California street address.

a. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name	Suffix
InCorp Services, Inc. C2373350			
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
5716 Corsa Avenue, Suite 110	Westlake Village	CA	91362

CORPORATION — Complete item 5c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) — Do not complete item 5a or 5b

N/A

6. Common Interest Developments

☐ Check here if the corporation is an association formed to manage a common interest development under the Davis-Stirling Common Interest Development Act (California Civil Code section 4000, et seq.) or under the Commercial and Industrial Common Interest Development Act (California Civil Code section 6500, et seq.). The corporation must file a Statement by Common Interest Development Association (Form SI-CID) as required by California Civil Code sections 5405(a) and 6760(a). See Instructions.

7. The Information contained herein, including in any attachments, is true and correct.

5/1/2019
 Date

Olivia Mills
 Type or Print Name of Person Completing the Form

Registration
 Specialist
 Title

Olivia Mills
 Signature